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=> d his

     (FILE 'HOME' ENTERED AT 14:54:21 ON 27 FEB 2004)

     FILE 'REGISTRY' ENTERED AT 14:55:02 ON 27 FEB 2004
                E FOLINIC ACID/CN
L1            3 S E3-E6

     FILE 'CAPLUS' ENTERED AT 14:57:47 ON 27 FEB 2004
L2         2380 S L1
L3           94 S L1 AND (INFECT? OR VIRUS OR VIRAL OR HIV OR AIDS)
L4           26 S L3 NOT PY>=1995

     FILE 'USPATFULL' ENTERED AT 15:06:13 ON 27 FEB 2004
L5         1605 S FOLINIC(W)ACID OR LEDERFOLINE OR LEUCOVORIN OR RESCUVOLIN OR
L6          373 S L5(S)(HIV OR VIRUS OR VIRAL)
L7            1 S L6 NOT PY>=1995
L8            2 S L5 AND NYCE
L9            2 S L6 NOT PY>=1999
L10         411 S L5(S)(CANCER OR ANTI(W)CANCER)
L11          34 S L10 NOT PY>=1995

     FILE 'MEDLINE' ENTERED AT 15:20:30 ON 27 FEB 2004
L12         386 S L11
L13          38 S L10(S)(LUNG)
L14          23 S L13 NOT PY>=1995
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L14 ANSWER 23 OF 23 MEDLINE on STN
ACCESSION NUMBER: 80089711 MEDLINE
DOCUMENT NUMBER: 80089711 PubMed ID: 6985825
TITLE: Combination chemotherapy with cyclophosphamide, adriamycin, intermediate dose methotrexate, and **folinic acid** rescue (CAMF) in advanced **lung cancer**.
AUTHOR: Robert F; Omura G; Bartolucci A A
SOURCE: CANCER, (1980 Jan 1) 45 (1) 1-5.
Journal code: 0374236. ISSN: 0008-543X.
PUB. COUNTRY: United States
DOCUMENT TYPE: (CLINICAL TRIAL)
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals
ENTRY MONTH: 198003
ENTRY DATE: Entered STN: 19900315
Last Updated on STN: 19900315
Entered Medline: 19800324

AB Combination chemotherapy appears superior to single-agent therapy in treating a wide variety of tumors. Encouraged by this data, we conducted a pilot study using cyclophosphamide, adriamycin, intermediate dose methotrexate and **folinic acid** rescue (CAMF) in patients with advanced **lung cancer**. Forty-eight patients with unresectable tumors were entered on this trial, and treated with 500 mg/m2 intravenously administered cyclophosphamide, 50 mg/m2 intravenously administered adriamycin, 40--200 mg/m2 orally administered methotrexate (4 doses/24 hrs), and 5 mg orally administered folinic acid (6 doses/36 hrs); this regimen was repeated every three weeks if tolerable. There were 43 patients evaluable for toxicity and 34 (non-small types) for response. The major toxicities were myelosuppression and nausea and vomiting. The overall response rate (complete and partial responses) was 29.4% (10/34) and in 13 patients (38%), the disease was stabilized. Those responding had a median survival time of 10.5 months versus 4 months for nonresponders. Patients in whom the disease was stabilized had a median survival time of 8 months. CAMF is a well-tolerated drug combination with promising results in patients with advanced lung cancer.

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